



Incident Report

Print Date/Time: 09/07/2016 10:30
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00017174

Incident Date/Time: 8/30/2016 10:55:43 AM
Location: 2908 113TH AVE NE
LAKE STEVENS WA 98258
Phone Number: (425) 760-7975
Report Required: Yes
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 4
Status: 3
Nature of Call:

Unit/Personnel

Unit	Personnel
19D3	SS0135-Parnell

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	SCALES, SUMMER TYME	319 RHODORA HEIGHTS RD Lake Stevens WA 982589276	(425) 446-5246		Female	01/12/2000
1	Driver	SCALES, SUMMER TYME	319 RHODORA HEIGHTS RD Lake Stevens WA 982589276	(425) 446-5246		Female	01/12/2000
2	Driver	WOLFSTONE, TRACY LEE	2618 118TH DR Lake Stevens WA 98258	(425) 870-7730	White	Male	05/12/1949

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Suspect Vehicle	Passenger Car					b02484t	WA

Disposition(s)

Disposition	Count
R	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

08/30/2016 : 10:57:51 SP0379 Narrative: AA

08/30/2016 : 10:57:46 SP0374 Narrative: LR374

**08/30/2016 : 10:57:18 SP0374 Narrative: CC, COLD H & R, POS SUS INFO, RP PARKED NEAR POOL/FOOTBALL FIELD
WAITING BY BLK MUSTANG GT**

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. **E579672**CASE # **2016-00017174**LOCAL AGENCY
CODINGTOTAL # OF
UNITS **02** OBJECT
STRUCKTRIBAL
RESERVATIONDATE OF COLLISION **08** - **30** - **2016** TIME (2400) **1033** COUNTY # **31** MILES **N** **E** **IN** **OF** **0664**ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐
123RD AVE NE BLOCK NO. ☒ **20000**
MILE POSTDISTANCE **20TH STREET NE** OF (REFERENCE OR CROSS STREET)
MILES **N** **E** **S** **W**UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET ☒ PHONE **D: 4258707730**LAST NAME **WOLFSTONE** FIRST NAME **TRACY** MIDDLE INITIAL **L**STREET NEW ADDRESS **2618 118TH DR NE**CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **WOLFSTL515KK** STATE **WA** SEX **M** D.O.B. **05** - **12** - **1949**ON DUTY ☐ STATUS AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES **NONE**LICENSE PLATE # **B02484T** STATE **WA** VIN# **1GCCS138X58146736**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2005** MAKE **CHEV** MODEL **COLOR** STYLE **PK** VEHICLE TOWED ☒ TOWED BY GOVT. VEHICLE ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **ALLSTATE 964724811**VEHICLE LEGALLY STANDING ☐ CITATION # CHARGEUNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET ☒ PHONE **D: 4254465246**LAST NAME **SCALES** FIRST NAME **SUMMER** MIDDLE INITIAL **T**STREET NEW ADDRESS **319 RHODORA HEIGHTS RD**CITY **LAKE STEVENS** ST **WA** ZIP **982589276**CDL RESTRICTIONS **B** ENDORSEMENTSDRIVER'S LICENSE # **SCALEST003BK** STATE **WA** SEX **F** D.O.B. **01** - **12** - **2000**ON DUTY ☐ STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **2** INJURY CLASS **1** NATURE OF INJURIESLICENSE PLATE # **ATM2877** STATE **WA** VIN# **1FALP42T3RF128756**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1994** MAKE **FORD** MODEL **MUSCP** STYLE **CP** VEHICLE TOWED ☒ TOWED BY GOVT. VEHICLE ☒REGISTERED OWNER INFO. **JASON SCALES 319 RHODORA HEIGHTS RD LAKE STEVENS WA 98258**LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **MIDDLESEX INSURANCE COMPANY 474740320**VEHICLE LEGALLY STANDING ☒ CITATION # CHARGEOFFICER'S NAME (PRINT) **K. PARNELL** BADGE OR ID # **0135** AGENCY **WA0311900**


**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E579672**CASE # **2016-00017174**
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Veh. 1 was stopped at stop sign NB on 123rd Ave NE at 20th St. NE. Veh. 2 was stopped directly behind Veh. 1. Veh. 1 rolled backward and the rear of veh. 1 impacted the front of veh. 2. Driver of veh. 1 exited vehicle to inspect damage, then returned to veh. and drove away NB on 123rd Ave NE. Driver of veh. 2 took picture of veh. 1 as it left the scene.
Report was taken from different location, scene not observed.
Driver of veh. 1 gave similar account of events when later contacted at his home.

**** AUTO-POPULATED SECTION ****

THE FOLLOWING ARE DESCRIPTIONS ENTERED FOR ITEMS SELECTED AS "OTHER":

Motor Vehicle Unit 1

Action Code: ROLLED BACKWARD

**** END OF AUTO-POPULATED SECTION ****

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

K. PARNELL

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

08-31-16 06:27 AM

DATED

PLACE SIGNED

APPROVED BY

BOB SUMMERS 0079

DATE

8/31/2016 9:58:06 PM

BADGE OR ID #	0135	ORI #	WA0311900	TIME POLICE DISPATCHED	10:55 AM	TIME POLICE ARRIVED	11:20 AM
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REPORT NO. E579672

CASE # 2016-00017174

DATE AND TIME
OF COLLISION 08/30/16 10:33

Not drawn to scale

Not observed

